LITTLE BLUE BOOK NO. 690
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Author of "The Caveman Within Us," "Sanity in Sex," "Health and Self-Mastery Through Psychoanalysis and Autosuggestion," "The Puzzle of Personality," "Autosuggestion — How It Works," "Psycho-Analysis—the Key to Human Behavior," "Rejuvenation — Science's New Fountain of Youth," "Rational Sex Series," etc.

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MAN'S SEXUAL LIFE

CHAPTER I

SEXUAL NATURE OF MAN

Maudsley, the English psychiatrist, has given us a hint of the social, ethical, and esthetic significance of the sexual urge in the following words: "If man were robbed of sexual desire and everything mentally connected with and emanating from the same, almost every vestige of poetry and perhaps all moral sentiment would be torn from his life."

Numerous other authorities and philosophers, and thinkers from time immemorial have reminded us of the measureless influence of our sexual nature in non-sexual channels.

Notwithstanding all the authentic testimony of the far-reaching ramifications of this great biological impulse—which, upon reflection, is self-evident—it has been the accepted policy not to talk about it openly, frankly and honestly. Oh, it *has been* discussed in the language that strangles truth, that deflowers honesty, that sickens intelligence! It has been, and is, the inevitable topic in the whispered gossip of the backstairs, in tap-room ribaldry, in the verbosity of the gutter, and among the gutter-minded in all spheres of life.

And mankind has paid for his pathetic blindness at usurious rates.

Love has been exalted, truly and sentimentally, literally and romantically, as the

transcendent, elevating force of humanity. But what is love, even in its noblest form, but the supreme refinement of the sexual impulse? And how are we to understand love, and develop the background from which it springs, unless we comprehend the vital force behind it?

When I say that love is the supreme refinement of the sexual impulse, I do not mean that it has been refined out of all its vital and inherently human qualities. That process is as spurious as the refinement of a denatured food product from which all the vital, life-fostering elements have been removed, leaving nothing but a superficially pleasing residue which at best starves the body, at worst poisons it.

The devitalized thing which spiritual (and physical) eunuchs masquerade as love, which lacks the warm, pulsating throb of its true nature, will starve the hungry heart and soul, or poison them.

It has been said—by whom, I cannot now recall—that "Love is the consciousness of the unconscious instincts in the service of the species." This is an uncommonly astute observation, and is clearly a recognition of the sexual basis of love, even though, like all epigrams that sum up so much in a few words, it is woefully inadequate.

Love, the transcendent, elevating force of humanity, is reflected in its individual expression, in a harmonious development of the socialized impulses and those individual qualities which typify mental and spiritual growth.

The socialized impulses should not be con-

fused with the more primitive gregarious instincts, which prompt people to respond to the stampede of the herd, and submerge their individuality into its collective passions.

The predominant passion of the herd is hate, not love, as history so graphically testifies, and as our own observation confirms every day.

The great lovers and benefactors of mankind have been those individuals who have felt no thrill in following the crowd—nor in leading it either, for that matter. Their audiences have always been pitifully small. Often they have stood alone, ostracised. For their wisdom, they have received the hemlock cup; for their evidences of an all-inclusive love they have suffered Golgotha; for their humanistic impulses, they have been jailed and jeered and scorned.

DYNAMIC NATURE OF MASCULINE SEX IMPULSES

Schopenhauer described the sexual impulse as "the completest outward manifestation of the will to live, the concentration, that is to say, of all wills. . . . The affirmation of the will to live concentrates itself in the act of generation, and this act is its most determined expression."

In man, the sexual impulse takes a more dynamic turn than is the case with woman. As I have observed in "*Woman's Sexual Life*" (Little Blue Book No. 689), woman's sexual nature, because of her physiological structure, is normally less dominated by a powerful urge that seeks specific expression, less centered upon the immediate goal of concrete sexual experience. It is more diversified, and ex-

presses itself in more general affectional channels.

Because woman's sexual feelings are less centrally conditioned, she is in the somewhat paradoxical position of bearing excessive sexual gratification on the one hand and suppression of sexual desire on the other, better than man.

In making this statement, I do not wish to imply that either excessive gratification or suppression is harmless to woman. The pathology of womankind is only too largely a history of the results of these two factors. Generally speaking either condition has been thrust upon the woman by circumstances quite beyond her control.

But in dealing with the pathology of man's sexual life, we find less suppression because his dynamic sexual urges have never to any considerable extent submitted to suppression, and when he has over-indulged himself sexually, he has paid a greater physiological penalty than has woman.

"Love in woman," says Lombroso, who is always interesting, although sometimes inaccurate, "is in its fundamental nature no more than a secondary character of motherhood, and all the feelings of affection that bind woman to man arise, not from sexual impulses, but from instincts, acquired by adaptation, of subordination, and of self-surrender."

Lombroso's conception of the factor of motherhood (actual or potential) as having a predominating influence on woman's amative life is correct, but his denial of the sexual character of this impulse is wrong. He con-

sidered the term "sexual" in too limited a sense. The instinct of motherhood, and all the impulses concerned with woman's reproductive life are decidedly sexual.

The capacity of woman for adapting herself to sexual extremes is responsible for the Hindu maxim that sexual desire in woman can as little be satisfied or fed full as a devouring fire can be fed full of combustible materials, or as an ocean can be overfilled by the rivers that pour their waters into it.

There is perhaps in this estimate an implication of woman's inferior status as an individual, peculiar to the Orient; but aside from this, and making allowance for the exaggeration of the metaphor, it indicates an opinion that, under certain conditions, at least, is based on keen observation of sexual phenomena.

Lombroso finds proof of the comparative sexual indifference of woman and of the greater sexual need of man in the existence of prostitution, with which can be contrasted the existence only among the degenerate classes (both rich and poor) of a small group of male prostitutes.

This authority also refers to the prevalence of the sexual psychoses in men, which are so rare in women, as an indication of the greater intensity of sexual desire in the former. He also refers to a series of facts, as for instance, to the occurrence of so-called platonic love, which though often hypocritical, has a real existence more often in the female sex than in the male; to the more enduring chastity of girls, and to the ready adaptation of women

to polygamy, which sociologists have noted, as well as to their generally more consistent observation of monogamy.

Some of the most significant and candid self-revelations of the tortures of sexual suppression have been given by those who have subjected themselves to long-continued continence on religious grounds.

Augustine, in his "*Confessions*," narrates the superhuman fight he made with the "demon of the flesh." He says "My heart was burning, boiling and foaming with unchastity; it was poured out, it overflowed, it went up in licentiousness."

The Christian Church, in fact, for hundreds of years has waged a constant fight in its own ranks over the burning problem of the sexual desires of its own members, and particularly its clergy—and who would be the optimist to assert that it has settled the question!

At the very beginning, the fanatical attitude of asceticism was pronounced. The conflict became so pressing, however, that the Church by degrees was forced to moderate its severe demands, and change its conception of the word "adultery."

Thus, the Church Council at Toledo (400 A. D.) allowed any unmarried layman not only to keep a mistress, but also temporarily to go to another woman "for the demands of the temperament."

The Church Council in Rome (1059 A. D.) admitted every unmarried man's right to keep a mistress. Thus there was a tolerance on the part of the Church, forced by a recognition of

biological facts, to accept the formerly forbidden sexual intercourse between unmarried men and women, if there existed the formality of mutual agreement.

The age-old fight of the Church to force celibacy upon its priests is an old story, with its repudiations, evasions, and finally the outward conformity, more or less successfully imposed by Gregory VII (1074 A. D.).

The revolt of the 16th century reformers was due in no small part to the widespread protest against ecclesiastical celibacy, and the resultant immorality among the clergy.

THE ORGANIC ASPECT OF SEX

Glandular secretions, among other physiological factors, play a paramount role in the sexual life of man. It will not be denied that these secretions may be influenced by the mind —as an attitude, or state of mind, always in some way reflects itself physiologically by acting upon the ductless glands, either inhibiting, stimulating or modifying their action in some degree.

From this it must not be assumed that by trying to cultivate a mental attitude centered upon celibacy, continence will be easy, or even possible, under certain conditions, if a normal state of body and mind is to be maintained.

To begin with, the arbitrary assumption of this attitude by strongly sexed natures is such a violation of nature's intent that it sets other internal forces at liberty which work to a contrary purpose. A terrific internal conflict results, which interferes with the individual's performance of constructive tasks. Even if he

succeeds in maintaining a state of celibacy, it is often at the price of health, productiveness and mental balance.

Undersexed men, who may be considered subnormal types physiologically, although sometimes well endowed otherwise, will not be subjected to this tormenting stress. People of this type—who can only be considered as sexual invalids—frequently attempt to set up standards for normal men to follow. The result is obvious.

Contraction of muscles of the different organs, and glandular secretions, although primarily controlled by the sympathetic nervous system, are also influenced by spinal nerves and bodily conditions, or irritations (*peripheral stimuli*).

Thus, the secretion of semen in the testicles is influenced by the brain as well as the sympathetic nervous system. Under ordinary conditions, the secretion of semen is more or less constant, but by some special irritation, either occurring within the sexual organs, or of a psychic nature, the secretion may be considerably accelerated.

This is a recognition of the interrelationship of mental and physical entities within the organism, which should always be stressed by the scientific student. Indulgence in erotic thoughts and conversation tends to increase the seminal secretion, which must be released either by night emission, masturbation or coitus.

On the other hand, physiological factors will work toward the stimulation of the secreting activities of the sex glands, which will cause

the mind to focus on erotic subjects. The eating of rich, highly seasoned foods and an excess of meats and other proteins, especially by people of sedentary habits, will so react upon the metabolism and physiological processes that the activity of the sex glands is stimulated.

While the relationship of the glands to the rest of the organism is clearly reciprocal—one influencing the other, and receiving influences from each other—the fact must not be overlooked that the glands are in one respect dominant. By this I mean that all the characteristics, physical and mental, of the individual are predetermined by the particular glandular make-up which the individual inherited.

The glands determine the specific type of the personality, the shape and growth of the skeleton, the teeth, the distribution of the flesh, the color of the eyes, hair and complexion, and numerous other phases of our physiological being. This includes, of course, the sexual type, and determines whether one is inherently of a strong, passionate sexual nature, moderately constituted in this sphere, or subnormal. Any one of these conditions, of course, is subject to various degrees of modification by the countless influences that come into our life, but none of these can change the inherent *type* of our personality.

This conception has been summed up well by Dr. Llewellyn F. Barker of Johns Hopkins University, First President of the Association for Study of Internal Secretions, in the following words:

"More and more we are forced to realize that the general form and external appearance of

the human body depends, to a large extent, upon the functioning, during the early developmental period, of the endocrine glands. Our stature, the kinds of faces we have, the length of our arms and legs, the shape of the pelvis, the color and consistency of the integument, (the skin), the quality and regional location of subcutaneous fat, the amount and distribution of hair on our bodies, the tonicity of our muscles, the sound of the voice, the size of the larynx, the emotions to which our exterior gives expression, all are to a certain extent conditioned by the proclivity of our glands of internal secretion."

So you see it is possible to study character and biography from the standpoint of glandular types—which Dr. Louis Berman has done most illuminatingly in his book, "*Glands Regulating the Personality*" (Macmillan).

As Berman expresses it, these glandular influences are at the basis of personality, creating genius and dullards, weakling and giant, Cavalier and Puritan. All human traits may be analyzed in terms of them because they are very largely expressions of the internal chemistry. "Gay vivacity and grim determination, the temperament of a Louis XIV, and the soul of a Cromwell, are the crystallizations of these chemical substances acting upon the brain."

Berman discusses a number of outstanding historic personages, analyzing their physical and mental characteristics, from the standpoint of endocrinology, and attributing their respective roles in history purely to their abnormal glandular constituency. Napoleon, Nietzsche,

Darwin, Florence Nightingale, Oscar Wilde, and others are dissected in this light.

Of Napoleon, we are told that the first characteristic about him that struck anyone was the matter of his height. He was definitely sub-average, at death being about five feet, six inches in height. Deficiency or excess of growth always directs attention to the pituitary gland. His sharply outlined features and powerful lower jaw, combined with oddly small plump hands, long straight black hair and dark complexion, all point to the pituitary, with a secondary adrenal effect. His pulse was slow, according to Corvisart, his personal physician, rarely above 50 to the minute. His sexual life, his libido, was abnormal. Curiously explosive in their appearance and manifestations were his sexual impulses. They "beset him on occasions which were sometimes inconvenient, and a peculiarity about them was that they subsided with equal suddenness, if not immediately gratified, or if something occurred to discourage his attention. All women were to him "*filles de jois.*" Sexual rather than social attractions in women appealed to him."

He was never in love, never possessed of permanent affection or tenderness for any woman. This explosive periodicity of the sexual life, "with a tendency to compression of it to the merely physical," is another mark of some pituitary-centered personalities.

Pituitary disturbances in the form of "brain storms" tinctured his life. There were attacks of vomiting followed by "stupor verging on unconsciousness," brought on by outbursts of temper, physical over-exertion, mental strain.

or sexual excitement. It has been shown that such epileptic tendencies are present in subjects of pituitary disease, particularly those with instability in the function of this gland.

In Napoleon's case, the brain attacks may have been crises of pituitary insufficiency in a hyper-pituitary type. This supposition is borne out by the headache which followed his attacks, the headache of an over-secreting pituitary compensating for a defect in its formation.

"During his prime, his intellect was mathematical, logical, rational, and remarkable for a prodigious memory. Such an intellect is the product of an extraordinary ante-pituitary. That he never permitted feeling to interfere with the dictates of his judgment, a quality which rendered him the most unconscrupulous careerist in history, must be put down to an insufficiency of the post-pituitary."

Napoleon lacked a chemical trace of the sympathetic instinct, and his conquests were made possible only because he was blind to the suffering and misery his greed for glory and dominion generated. Post-pituitary insufficients of this type, obvious and concealed, gradually become corpulent as they grow older. The increasing corpulency of Napoleon in his latter years was commented upon by all observers.

His endocrinological classification may be summed up as that of a pituitary centered, ante-pituitary superior, post-pituitary inferior, with an instability of both that would lead to his final degeneration. His insatiable energy indicated an excellent thyroid, his pugnacity, animality and genius for practical affairs a superb adrenal. "Given the kind of pituitary

he possessed with its great intellectual potential energy and the relation between the two parts which would further the objects of an intellectual machine, plus a remarkable thyroid and adrenal, plus the military education Napoleon had, and the character of the Revolution into which he was plunged, and we have the conditions out of which his career emerged as inevitable."

While discussing the glands, it might be pertinent to state that there is considerable popular misapprehension on the subject. To numerous undiscriminating people, glands mean solely the gonads—the testicles. Now, organically these are not indispensable to life. Men and animals may live to an old age without their gonads, although, of course, there will be physiological and psychological effects, unless the glands are lost late in life. Certain other glands, however, such as the parathyroids, the adrenals, etc., are absolutely essential to life, and death results from their removal. To the prurient mind, however, which is really obsessed by morbid sex interest, there is no fascination or stimulation in these vital but matter-of-fact functions of the body.

CHAPTER II
MASCULINE POTENCY AND FERTILITY

The structure and functions of man's sexual organs have been described in considerable detail in Little Blue Books Nos. 653, 654 and 656 of this series, so it will be unnecessary to cover the same ground in this book.

There is, however, so much of importance that has not been said with regard to masculine potency and fertility, and impotence and infertility, that this subject warrants adequate attention in a treatise dealing with man's sexual life.

Potency, in the present sense of the word, is sexual vigor; fertility is the ability to procreate children. A man may possess one of these characteristics and not the other, for reasons which have been set forth in preceding volumes.

Generative power, or fertility, depends primarily upon the presence in the semen of spermatozoa in abundant quantity and proper quality. This vital fluid is so intrinsically masculine, as well as biologically important, that it will be well to observe its principal features.

Semen, normally, is a whitish, semi-transparent fluid of a characteristic odor, and having the consistency of thin cream. It is contributed by three principal organs: the testicles, seminal vesicles and prostate. The fluid contains the following organic elements:

1. Microscopic aggregations of a glossy, crystalline substance, of various shapes.

2. Numerous granules, small and very pale, of an albuminous nature, which disappear on treatment with acetic acid (vinegar, etc.)

3. A small number of oval or rounded cells about the size of white blood corpuscles.

4. Sometimes prostatic calculi (stone-like secretions). These are an inconstant constituent, but are frequently present after repeated coitus. According to some authorities, they also emanate from the bladder and urethra, as well as the prostate. They are yellowish in color, irregular in form (sometimes triangular, sometimes oval or rounded).

5. Spermatozoa normally are present in countless numbers.

In exceptional cases, especially in elderly men, there are additional organic elements, such as scattered red blood corpuscles, granules of yellow pigment, and various cell structures.

The spermatozoa are microscopic, pollywog-shaped bodies, about 1/500 of an inch in length, with triangular, flattened heads and whip-like tails, upon which they depend for their motile powers. While alive and healthy, they are continually in motion. Fertility depends upon the number and vitality of these tiny organisms. Many millions are believed to be given out in a single act of ejaculation.

The spermatozoa are composed of a substance rich in sodium chloride (common salt), and considering their minuteness possess remarkable vitality and resistence to reagents and to putrefaction.

The movements of the spermatozoa may

properly be observed only in fresh, pure semen. If fresh semen is diluted with water, or cooled down to a temperature of 50 degrees Fahrenheit, the movements of the spermatozoa soon cease, and their tails roll up in a spiral form. However, by the addition of concentrated solutions of neutral salts, of albumen, of urea, etc., it is possible to reanimate these motionless spermatozoa, so that once more they may be observed to perform active movements.

If healthy semen, with adequate fertilizing capacity, is properly preserved from cold and light, the spermatozoa may still be observed under the microscope in active movement after a lapse of twenty-four hours.

A fresh drop of semen under the microscope has been compared to a "stirred up ant-heap," so full of movement is it. The longer the semen remains under observation, the less active are the movements of the spermatozoa, and outside of their natural environment gradually die.

Under the impetus of the lashings of its whip-like tail, the spermatozoon moves steadily and confidently forward, finding its way through the narrowest passages on the microscopic field without striking any of the cellular structures that may lie in its path.

Moderately concentrated animal secretions of an alkaline reaction promote the motor activity of the spermatozoa. Caustic potash and caustic soda also stimulate their movements.

On the other hand, acid secretions, such as urine, acid mucus (including that from the vagina), and catarrhal secretions, even when

alkaline in reaction, have an injurious influence upon this activity. Acetic acid, such as vinegar, and mineral acids in solution, and salts of the heavy metals, are also harmful to the spermatozoa.

Frequent repetition of coitus diminishes the number of spermatozoa present in the semen, and detracts from their motor activity.

Semen, of course, which contains no spermatozoa, or in which the spermatozoa, if present, are motionless, is absolutely lacking in fertilizing power. This is true even though the external genitals are strongly formed, the testicles normal in size, and erection and ejaculation indicative of virility. A decisive opinion regarding the quality of a man's semen can be given only after a series of careful microscopic examinations.

VITALITY OF SPERMATOZOA

It is difficult to determine accurately how long spermatozoa can continue to live in the interior of the uterus or fallopian tubes. This question is of real importance, not only from the standpoint of conception, but also with regard to the occurrence of menstruation. Dr. Percy has published a case in which, eight and a half days after the last coitus, he saw living spermatozoa emerge from the mouth of the uterus.

Dr. Sims gives the weight of his opinion that spermatozoa can never survive longer than twelve hours in the vaginal mucus, but states that in the mucus of the cervical canal (neck of the womb), they can live much longer. If microscopic examination of the cervical

mucus is made from thirty-six to forty hours after coitus, living and dead spermatozoa are commonly found in about equal numbers. Many of them will survive their removal from the cervix for as long as six hours.

Some of the conditions which are liable to render a man incapable of producing fertile semen are of special interest in this connection. The congenital absence of both testicles is very rare. The congenital absence of one testicle, however, known as *monorchis*, is not so rare, and this condition is sometimes accompanied by the absence of the epididymis, vas deferens, and seminal vesicle of the same side. In a case of this kind, the monorchid's procreative powers depend upon the proper development of his single testicle, and its functional capacity can only be determined by a careful microscopic examination of the semen.

The condition known as cryptorchism—nondescent of one or both testicles—is to be found more often than the absence of the testicle. The undescended testis is usually imperfectly developed, and in the very great majority of cases the fluid ejaculated from this testis contains no spermatozoa.

Atrophy of the testicle, with notable diminution in the size of the gland, is a further cause of the lack of fertilizing semen. This condition is rarely congenital. It is nearly always acquired, usually as a result of inflammatory conditions affecting the testicle or the epididymis.

Among various other causes that may lead to masculine sterility, with or without atrophy

of the testicle, are constitutional disorders, especially long-lasting, severe and exhausting diseases, such as diphtheria, diabetes, or chronic alcoholism; degenerative changes resulting from sexual excesses; also senile changes; consequences of the pressure of a hernia, a variocele, a tubercular, cancerous or other morbid growth.

Certain drugs such as salicylic acid, mercury, digitalis, iodide of potassium, arsenic and morphine also have an unfavorable influence both on the quality of the testicular secretion and on the potency of the individual.

Von Gyurkovechky reports that in Bosnia a plant known locally as "*neven*" is used by the peasants for the temporary suppression of sexual potency. Wives give it to their husbands when the latter are about to leave them and go on a journey, and sprinkle the leaves of the herb on the underclothing.

Azoospermia—as the absence of spermatozoa in the semen is called—can only be determined by microscopic examination. This condition, therefore, is one which may long remain undetected because the semen may be normal in quantity and the man possess vigorous sexual libido. *Azoospermia* may be either permanent or transitory. Most cases of sterility are undoubtedly due to this condition rather than to impotence or lack of sexual vigor.

Fortunately less common than *azoospermia* is *aspermatism*, a state in which the man is unable to ejaculate any semen at all. This condition may be either congenital or acquired. It may be permanent or transitory—if the

latter, lasting usually a few weeks or months.

Cases of this kind are due to organic changes in the testicles, diseases of the prostate, processes resulting from gonorrheal infection, or nervous disturbances involving the loss of irritability in the reflex center for ejaculation.

Aspermatism in the narrower sense of the term—that is, in which there is a total suspension of the activity of all the three glands which combine to secrete the semen, namely, the testicle, the prostate and the seminal vesicles, is, according to Furbringer, probably nonexistent. From this theory, the pathological state underlying aspermatism would appear to be the failure to ejaculate the semen, rather than the incapacity to secrete the fluid.

IMPOTENCE RESULTING FROM CONTINENCE

Impotence has also been attributed to long continued sexual abstinence, although this is still a controversial question. Furbringer cannot present any certain cases. Virey maintains that in "complete and continuous abstinence from intercourse" the male organs which prepare the semen—the testicles, seminal vesicles and prostate—and also the penis, become smaller, "unsightly, wrinkled and inactive."

Galen described a similar condition resulting in the case of the athletes of the Roman Empire, men who lived a life of strict continence.

The duration of man's sexual powers is quite variable, depending upon the constitution of the individual and the life he has led. In many instances virility has remained until extreme old age. In other cases there is an early

decline after the peak of maturity is reached.

Von Gyurkovechky has set the first evidence of decline in the sexual powers at about the fortieth year, and believes that normally these powers are exhausted at about sixty-five. There are so many exceptions, however, that this observation of a recognized authority has little practical value. Complete potency, that is, with respect to desire, erection and ejaculation, has been found in men of seventy and eighty years and over. There is also very conclusive evidence of men of ninety years and upward who have procreated children. An authentic case of spermatozoa in the testicles of a man ninety-five years of age is recorded by the English physician, Dr. Casper.

The principal causes of male sterility may be summed up as follows:

Absolute and Irremediable Sterility

Diseases of the central nervous system, and certain constitutional diseases.

Congenital or acquired absence of both testicles.

Atrophy of the testicles.

Complete azoospermia (absence of spermatozoa in semen).

Complete aspermatism (absence of, or inability to ejaculate, semen).

Senile impotence.

Relative and Transient Sterility

Developmental defects of the penis, and acquired deformities of that organ.

Stricture of the urethra.

Oligozoospermia (deficiency of spermatozoa in the semen).

Nervous impotence.
Gonorrheal or syphilitic infections.

That gonorrhea in the male has a deleterious influence upon the fertilizing quality of the semen, and therefore is an important factor in masculine sterility, is now an established fact.

With respect to azoospermia as a consequence of gonorrhea, Furbringer, as the result of the examination of numerous cases, laid down the important proposition that when epididymitis (inflammation of the epididymis or inflammation of the spermatic cord) had been observed to occur in this connection, the probability that the patient would be an azoospermatist was expressed in the ratio of 9:1.

Gosselin, as early as 1853, was the first to point out the serious consequences to man's future generative powers which are entailed by an attack of gonorrhea, followed by epididymitis. He maintained that the inflammation might lead to obliteration of the spermatic channels, whereby the secretion of the testicles is prevented from mixing with the secretions of the prostate, Cowper's glands, and the seminal vesicles. Hence, the ejaculated semen would be lacking in its principal normal constituent—the spermatozoa. Furthermore, that in such cases, either in the epididymis, or else in the course of the vas deferens, some relic of the former inflammation is usually to be detected, and this represents the seat of strangulation of the excretory duct of the testicle.

Subsequent investigations conducted by Seeligmann and others have shown that in cases

of gonorrheal epididymitis, in addition to the inflammation of the epididymis, harm is done to the extensive system of lymphatic vessels which pass through the spermatic cord from the testicle. The changes left in the blood and lymphatic vessels by the inflammation result in the testicle being thereafter imperfectly nourished, and often leading to impairment of the functions of this organ. Thus, the deficiency of spermatozoa so frequently resulting from gonorrheal epididymitis is not always due to a complete obliteration of the vas deferens by the inflammation, but in many instances to the functional derangement of the testicle and its impoverishment brought about in the manner described.

CHAPTER III
MASCULINE VARIATIONS OF TYPE

What are the principal differences in the secondary sexual characteristics of man and woman?

There is no more involved phase of the whole sexual problem than the study of the secondary sexual characters. The phenomena of sexual differences must have attracted attention ever since man began to observe and think about the fundamental questions of life. At the present time we are not only interested in these phenomena, but even more so in the causative factors behind the phenomena.

Now we know that it is the basic character of an individual's internal chemistry—or his endocrine (ductless gland) system—which is the fountainhead of his or her sex, and this factor also determines the *degree* of masculinity or femininity, as the case may be.

The endocrine system is so complicated and variable in its interrelations that it may be said that no man is a hundred per cent masculine, and no woman a hundred per cent feminine. However distinctly unisexual an animal or human may be—and the same applies even more noticeably to plant life—there always remains a certain remnant of the bisexual character, which is traceable in its purest form back to the early weeks of intrauterine life.

The sex cannot be recognized, for instance, in a human embryo under five weeks. From the fifth week of embryonic life certain

processes commence which toward the end of the fifth month have transformed the earlier rudimentary genitals—at first alike in both sexes—into the definite sexual character of the individual.

As an example of the rudimentary hold-overs of the opposite sex, in the most masculine man there are developed under the skin of the breasts masses of glandular tissue connected with the vestigial nipples.

The most feminine type of woman has a growth of colorless hair, called the "lanugo," in the place corresponding to the male beard.

Haeckel has used the term "gonochorism" to indicate the differentiation of the sexes. Different classes and groups of creatures are characterized by different degrees of *gonochorism*. Various kinds of plants and animals may be distinguished by the extent to which the characters of one sex are rudimentary in the other.

The most pronounced gonochorism, or extreme example of differentation, is manifested in sexual dimorphism, that is, the condition in which the males and females of the same species differ as much, or even more, from each other as do members of different genera or species. Some water fleas, for instance, are well known examples of this type.

Gonochorism is not so sharply defined among vertebrates as among insects. In the case of the former, a distinction between males and females does not occur so completely as to constitute sexual dimorphism. There is, however, an occasional occurrence of abnormal hermaphroditism (combining to a greater or

lesser degree the primary sexual characters of the two sexes).

ABNORMALITIES MORE COMMON AMONG MALES

The more pronounced secondary sexual characteristics of men and women are so often referred to that it will be unnecessary to dwell at length upon them here. Suffice to say that we recognize among man's principal physical secondary sexual characteristics, in comparison with woman's, the following: Growth of a beard, typical structure and proportions of the body, more rugged form and features, relatively larger frame, with wider shoulders and narrower pelvis, larger hands and feet. Man's bony prominences are generally more conspicuous and his muscles more clearly defined. There is the deeper voice, the larger skull and brain weight—in conformity with the large physical frame generally.

Man is also characterized by his instinctive urge for action, and the utilization of energy. Woman, normally, is more given to repose and, for good biological reasons, the conservation of energy. Man is symbolic of the catabolic element, while woman represents the dominant anabolic element of the race.

Woman seems to be more in tune with nature. Nietzsche (referring to Plato's views of woman), has recognized this trait in these words: "Woman is more closely related to nature than is man. . . . In her being lies the healing strength, the beneficent rest which restores spent energies."

In this connection, Havelock Ellis gives expression to the following illuminating thought: "The progressive and divergent energies of men call out and satisfy the twin instincts of women to accept and follow a leader, and to expend tenderness on a reckless and erring child, instincts often intermingled in delicious confusion. And in women, men find beings who have not wandered so far as they have from the typical of earth's creatures; women are for men the human embodiments of the restful responsiveness of Nature. To every man, as Michelet has put it, the woman whom he loves is as the Earth was to her legendary son; he has but to fall down and kiss her breast and be strong again."

There are also the corresponding mental and psychological characteristics of the sexes. Man is the more aggressive and the more given to abstract reasoning. Woman is more intuitive, and as such her thought processes are naturally quicker than man's, and she is more responsive to emotional impulse. She is more inclined to religious feeling, more consistent in her affections, and undoubtedly more given to petty hates and dislikes—which is the basis for the term indicating a feline disposition which one woman so frequently applies to another.

The belief once prevailed that women are more variable than men, and more liable to exhibit congenital abnormalities. More recent evidence indicates, however, that man, in most respects, at least, is the more variable. Darwin, in the "*Descent of Man*," has gathered much data on this subject, and concluded that

there is a "greater general variability in the male sex."

There is more idiocy and more genius in the male sex than the female; more criminals and more ethical leaders. And notwithstanding the greater variability in this respect, the male sex has to contend at birth with a powerful factor that tends toward equality and mediocrity. This factor is the narrowness of the maternal pelvis, which makes birth more difficult and hazardous for boys than for girls.

Still-born children are much more frequently boys than girls, the proportion being approximately 140 males to 100 females. Havelock Ellis, who is undoubtedly our most eminent authority on this general question, contends that if it were not for this leveling influence, it seems reasonable to believe that the proportion of men remarkable for exceptional physical or mental qualities would be even larger than it actually is.

Boyd's tables have shown that the average brain-mass in the children who are born dead at full time is larger than in those who live. It was found that while the average new-born, living male child at full time has a total brain-mass about 1½ ounces heavier than the female, among the still-born the maximum male brain is nearly seven ounces larger than the maximum female brain. (The minimum brain of the still-born male is only a little over an ounce larger than the minimum female brain.)

CONGENITAL ABNORMALITIES

Congenital abnormalities are found much more frequently among males than females.

From the extensive records of the Western Infirmary of Glasgow, of 578 cases occurring in ten years, 60.5 per cent were males and only 39.4 per cent females. In every important group of abnormalities, except cleft palate, the males were predominant.

At St. Thomas's Hospital, London, during a seven-year period, hair-lip was found in 43 males to 20 females. Other institutions have reported an equal or greater prevalence of this abnormal condition among male children. Double hair-lip is almost exclusively found in males.

Hair-lip with cleft-palate is always found more frequently in males. Cleft-palate alone, as stated, is predominant in the females.

An unusual number of fingers and toes occur more often in males than in females. Strangely, even supernumerary breasts and nipples are more common in men than in women. Mitchell Bruce found among several hundred persons that 9.1 per cent men and only 4.8 per cent women possessed an extra nipple—the proportion being nearly two to one.

While acquired goitre is more common in women than in men, congenital goitre is much more frequent among males.

According to Dr. D. J. Cunningham, who has made a special study of the subject, an extra (eighth) true rib occurs twice as often in the male as in the female. This is a normal condition among the lower apes and the chimpanzee, so in the human it may be regarded as a reversion—if our "Fundamentalist" friends will permit.

All good feminists will be pleased to know of Schwalbe's contention that the male ear is much closer to that of the apes than the female ear, especially as regards the Darwinian tubercle. He further states: "We are here concerned with a very remarkable fact, that the female sex here does *not* exhibit the more primitive forms, as, for example, in the formation of the sexual organs, but the derived form." Among a considerable number of persons of both sexes which this authority examined, he found the Darwinian tubercle present in 73.4 per cent of the male ears and in only 32.8 per cent of the female ears.

Ogle found left-handedness to be twice as prevalent in men as in women. There are more male than female deaf-mutes.

Among what may be classified as normal bodily differences between the two sexes are these: The bodily temperature of man is slightly higher than that of woman. Man have five million red blood corpuscles to every cubic millimeter of his blood, while woman has four and a half million.

With respect to arithmetical prodigies—undoubtedly a form of mental abnormality—Dr. E. W. Scripture, who has studied these cases quite exhaustively, found not less than twenty-one men to one woman. The latter, Lord Mansfield's daughter, almost equalled Colbourn, who at his zenith, was perhaps the very greatest. This form of abnormality is not due to education, but is a congenital trait and has been found in uneducated persons, who sometimes have been little above the idiot in their general mental calibre.

The more highly developed sexual perversions (both congenital and acquired) are also much commoner in men than in women, although minor disturbances may be considered fairly prevalent in the latter.

With respect to genius, Ellis states: "We must regard genius as an organic congenital abnormality (although the evidence in proof of this cannot be entered into here), and in nearly every department it is, undeniably, of more frquent occurrence among men than among women. The statement of this fact has sometimes been regarded by women as a slur upon their sex. They have sought to explain it by lack of opportunity, education, etc. It does not appear that women have been equally anxious to find fallacies in the statement that idiocy is more common among men. Yet the two statements must be taken together. Genius is more commong among men by virtue of the same general tendency by which idiocy is more common among men. The two facts are but two aspects of a larger zoological fact—the greater variability of the male."

SEX AND THE SENSES

The close relations which obtain between the sexual life and the sense of smell leads to the supposition that the sexual and the olfactory spheres of the cerebral cortex (external gre. layer of the brain) are in close proximity one with the other.

The development of the more dynamic phases of sexual life has its beginnings in the organic sensations of the developing reproductive glands. A mutual dependence consequently

arises between the cerebral cortex as the place of origin of sensations and perceptions, and the organs of generation. By physiological processes these now give rise to sexual perceptions. representations and impulses.

The reciprocal influence between the brain and the organs of generation is affected by the intermediation of the vascular nerve centers situated in the lumbar enlargement of the spinal cord.

The psycho-physiological process embraced in the conception of the sexual impulse is, according to Krafft-Ebing constituted in the following manner:

1. Of the central or peripherally aroused perceptions.
2. Of the pleasurable sensations associated with these.

From these arise the impulse to sexual satisfaction (*libido sexualis*).

The impulse becomes stronger in proportion as cerebral excitement consequent on appropriate perceptions and the working of the imagination, strengthens the intensity of these pleasurable sensations.

In this connection, Kisch remarks: "If the conditions are favorable to the performance of the sexual act by means of which satisfaction is attained, the continually increasing impulse finds expression in action; in other circumstances, inhibitory perceptions intervene, sexual excitement diminishes, the activity of the center of erection is inhibited, and the sexual act itself is prevented. In the case of civilized humanity the ready action of such perceptions

for the inhibition of the sexual impulse is necessary and decisive. On the strength of the impulsive perceptions the constitution and various organic processes have an important influence; on the strength of the inhibitory perceptions, education and the cultivation of self-control are powerfully operative."

Sexual differences in keenness of smell have long been under scientific observation. Throughout nature, the sense of smell plays an important role in the sexual life of animals, and in the human race it is not by any means negligible. The extent to which cologne and scented powders are used will give some intimation of the present status of the sense of smell in the sexual life of human beings. But aside from this aspect of synthetic artifices, man still retains a great deal of natural olfactory sensibility in relation to sex.

While there is a lack of unanimity of opinion upon the subject, it is generally agreed as a result of careful tests that the man's sense of smell on the average is more acute than that of woman. There are exceptions, of course, and among hysterical young women there is often an excessive keeness of this sense.

In the 1880's, Drs. E. H. S. Bailey and E. L. Nichols, American University Professors, first attempted to measure accurately the sexual differences with respect to smell. They stated in their conclusion: "Our average shows that the sense of smell is much more delicate in the case of male than female observers.

Dr. Ottolenghi, of Turin University, made a series of observations on thirty normal men

and twenty normal women of the lower and middle classes; and at the same time he experimented on 80 criminals of both sexes. He found that olfactory acuteness was slightly less in women than in men.

On the other hand, Garbini, who based his conclusions on experiments with young girls and boys, found the former had greater olfactory sensibility and precocity. The difference, however, was very small, and tended to decrease with age, so that at the age of six, both sexes were practically equal. This test, of course, proved the greater precocity of girls, rather than that women have a sense of smell superior to men.

SENSE OF TOUC

There seems no doubt that woman's sense of touch is more acute than man's. Ottolenghi and Di Mattei in Italy, Den in Russia, Stern in Germany, Galton in England, Helen Thompson in America, all found from extensive tests that the tactile sensibility of woman is superior to that of man. Lombroso, alone of the important experimenters, dissented, maintaining that women have a less acute sensibility than men. But even he found this sense was highly developed in young girls between the ages of six and twelve.

Galton's experiments were particularly ingenious, applying compasses to the nape of the neck, thus avoiding the results of varying exercise and varying roughening of the skin. From his tests of 1300 individuals, he found that women showed keener sensibility than men, the relative proportion being, roughly, about 7 to

6. He discovered greater variability in this respect among women, which he attributed to the fact that women are less accomplished than men in the exercise of sustained attention.

Marro's observations on the sensibility of the tip of the index finger, between the ages of ten and twenty, showed that before fourteen the girls were more sensitive, whereas, after fourteen, the boys evidenced keener sensibility.

The variability and educability of the sense of touch is more pronounced than we are apt to realize. The extremely high degree of tactile sensibility of blind people is the best evidence of how this senses may be cultivated. Of course, in this instance, there is also the factor of compensation. Increased tactile perception is a compensation for the loss of sight, probably involving psychic factors as well as physiological (nerve and skin).

SENSE OF TASTE

Professors Bailey and Nichols seem to have been the first to accurately measure the sense of taste, as they did the sense of smell. Contrary to the general notion, their observations were that the sense of taste is more delicate in woman than in man. This is true of all substances excepting salt.

The superior sense of taste of women was not attributed to any factors of education or cultivation of this sense, as men with great experience in handling drugs were surpassed by women without any such training, even detecting extremely weak solutions of common pharmacal substances such as quinine, acids, alkalis, sugar.

A most interesting illustration of the variability of the sense of taste among persons of the same sex, but of different environmental circumstances, is given by Dr. Pauline Tarnowsky. Her investigations in respect to the senses of normal women, criminal women and prostitutes in Russia showed that women who live in towns have keener senses than women who live in the country. Thus while criminals as a rule have more obtuse sensory perceptions than normal persons, Dr. Tarnowsky found that town-dwelling thieves had a much keener sense of taste than honest peasants who had never lived in a town.

Helen Thompson, of Chicago, found that women perceive tastes more quickly than men, but that men discriminate them more accurately. It is her opinion that this power of discrimination is by no means necessarily associated with quick sensory perception, as is commonly supposed, but may be connected with a more obtuse perception.

SIGHT

A comparison of the disturbances of sight between men and women, based on sex, is on the surface apt to be misleading unless various other factors are taken into consideration. Men, for instance, are more exposed to the hazards of eye-injury in industry.

Considering minor defects of vision, however, it seems that women are the greater sufferers. Dr. R. Brudenell Carter, whose analysis covers 10,000 cases of both sexes, found a preponderance of eye defects in the female sex. There was no special proclivity to any form of eye

disease. He is inclined to refer it to the greater sensitiveness of the female sex, to the more sedulous employment of their eyes over a varity of sedentary occupations, and to their weaker muscles, which are less able, as a rule, than those of men, to maintain prolonged effort of accommodation or convergence.

Dr. West who examined nearly fourteen hundred boys and girls in the public schools of Worcester, Mass., found the percentage of defective eyes distinctly greater among girls, the difference being over ten per cent. Among boys, however, the defects seemed to be more serious in a large number of cases.

Dr. F. Warner, an English specialist, from his observation of 60,000 school children also found that serious eye defects are more common in boys.

Galton observed that men generally are slightly superior to women in keenness of vision.

Those who, like Newton, are able to make out the seven colors of the spectrum, see a dark blue band between blue and violet, and they see a broader orange band than ordinary people. They are always very fond of color. Edridge Green, who has made some investigations in this field, found only three persons who saw the seven colors. They were all males. He considers people so gifted are about 1 in 2,000 or 3,000.

With regard to color perception, Professor Nichols found that the average male observer is distinctly more sensitive to red, yellow and

green, while the female shows superiority in blue alone.

The observations of Helen Thompson of Chicago University showed that while women were better than men in color vision, men were somewhat better in brightness vision and more sensitive to light.

Havelock Ellis concludes, taking the evidence as a whole, that in most, if not all, civilized countries women are more liable to slight disturbances of eye-sight, due to defective accommodation, which are peculiarly associated with civilization. Men, on the other hand, are more liable to serious eye defects.

COLOR-BLINDNESS

Color-blindness, or Daltonism, has a much more marked sexual bias than ordinary impaired vision and optical disturbances. Color-blindness is not the result of a disease, nor is it associated with diseased conditions. It is a defect comparable to albinism, and to the congenital abnormalities that are more common in males all over the world. Its hereditary character is well recognized. Dr. Pliny Earle, we are told, had out of 32 male and 29 female relatives, 20 who were color-blind. Of these only two were female.

The Committee of Color blindness of the Ophthalmological Society found, among males generally, that out of 14,846 individuals, the percentage of pronounced cases of color-blindness was 3.5, the average percentage being 4.16. They found that color-blindness was nearly always much slighter in females than in males, and even then existed only in 0.4 per cent. T.

H. Bickerton found the percentage 0.16. Therefore, while color-blindness exists in about 30 or 40 per thousand males of the general population, it is present in only 1 to 4 per thousand females—thus being at least ten times as prevalent among men as among women.

As has been stated, color-blindness is an hereditary character. While there is still a great deal to be learned regarding its nature, some of its hereditary peculiarities have been noted. It has been observed that a color-blind man often will not have color-blind children; nor will the children of his sons be color-blind, but the sons of his daughters will usually be color-blind.

It will be seen, therefore, that this ocular abnormality, which is comparatively rare in women, is transmitted from man to grandson through the female. Color-blindness is understood to have its seat, not in the visual center, but in the eye itself, or in the nerves of the eye, whereby imperfect sensations are transmitted to the brain.

CHAPTER IV

NERVOUS DISORDERS PECULIAR TO MEN

Nervous disorders are the bane of modern civilization. This statement has been made many times before, but so true is it that it will bear repetition.

The most frequent results attributed to "nerves" are breakdown—nervous and mental—and acute disturbances of certain organs or combinations of organs.

Naturally, many predisposing and contributory causes may be involved in nervous disturbances. There is, to begin with, the constitutional factor, perhaps the inherited tendency of a sensitive nervous organization. This in itself is not a liability, because people so organized, when they understand themselves and become adjusted, are among the most valuable and productive members of human society.

Those who are organically predisposed to nervous instability find their greatest handicap usually in faulty education and training in childhood. I do not mean the education that is believed to be acquired within the four walls of the school room, but the broader education which is the whole process of preparation for life. This is in no small way obtained, when acquired at all, in the home-life relationship—as exemplified by the character, intelligence, self-control and constructive habits and harmony of the father and mother, and other members of the family.

When, in the case of the sensitive young person, there is lack of stability, harmony, con-

structiveness, intelligence in the home life, there is prepared a fertile background for future nervous ailments, psychic conflicts and a general feeling of ineffectiveness to cope with the demands of reality.

A sound brain and nervous system rarely suffer from intellectual overwork, unless the work be distasteful or performed under objectionable conditions.

A healthy adult brain is capable of doing a great deal more work than is ordinarily expected of it. There are few brains that are worked to their maximum, and nervous disabilities are rarely caused by regular sustained application in itself. Nervous disorders, however, are often produced by doing work that is uninteresting or distasteful. When this condition exists there is present a constant internal conflict, and a tremendous amount of energy is wasted in fretting, worrying or other destructive emotional outlets.

It is understood that we are here considering mental application and nervous problems, and not physical labor. The latter is governed by much different circumstances. One person may be too light in weight or lacking in physical equipment and endurance to perform labor that to a more highly developed physical type would be as child's play.

Fatigue from mental effort alone is a rare phenomenon, usually transient, and often accidental, among men whose thinking is productive. It is on the other hand common and quite chronic among those who are engaged in uncongenial occupations—which may or may not be due to the occupation. It is often due

to the lack of self-control and want of constructive purpose on the part of the individual —in other words, to faulty preparation for life.

In considering the factors that lead to mental fatigue and nervous disorders, there is always one thing to bear in mind, and that is there must be mental and nervous relaxation. Physical relaxation is secured through sleep, but mental and nervous relaxation are only in part obtained in this way. There is further needed a form of activity, both mental and physical, that is quite removed from the daily routine. This is the fundamental condition of recreation —a term which is more expressive in its original form: *re-creation.*

Intellectual work in itself is a negligible cause of nervous exhaustion. It is almost inevitably the worry and anxiety incidental to many forms of intellectual pursuit, or neglect of the physical organism, of which the intellectual worker is often guilty, that undermines the health, saps the strength and leads to exhaustion.

The man who carries on his work free from the shadow of worry, anxiety and other distressing emotions, rarely becomes a victim of nervous exhaustion. If the enthusiasm for his vocational activities leads him to excessive application, he may experience a sense of fatigue, more or less severe, according to his capacity for resistance, but seldom anything more serious.

Fatigue of this kind, which is not fed upon worry or anxiety, soon brings its own remedy through the lessening of the cerebral activity which follows. A generous measure of rest

which the organism craves relieves the acute tension, and permits the replenishing of the depleted energy.

It has often been noted that the chief sufferers from nervous exhaustion are people who have been thwarted, or who encounter some unsurmountable obstacle. In other words, people as a rule do not become nervous wrecks while they are succeeding—when they are full of triumphant enthusiasm and are unhampered by anxiety and worry.

But if failure looms, they begin to worry and suffer a breakdown. The worry brings about an intolerable condition within the organism, and the crisis of the breakdown is nature's abnormal method or attempt to get away from the unbearable situation. It generally succeeds to this extent: the victim is forced of necessity out of the torturous situation which brought about the trouble. Whether or not he is able to get relief from the havoc that has been wrought depends in each case upon the particular set of personal, financial, social and other factors that are involved.

SEXUAL FACTORS IN NEUROSES

In setting forth the above remarks about nervous disorders, nothing was said of sexual factors which are so often (perhaps always) present in nervous crises. The statement was made in a general way because the principles as stated are always applicable. That the situation is further complicated by widely varying conditions which enter into the sexual life of every individual is a truism known only too

well by those who have given the subject any serious thought.

A nervous breakdown may be hastened or even caused primarily by utterly suppressing the sexual element of one's nature, while pursuing a highly geared course of intellectual activity. This situation implies that there is a lack of balance between the intellectual outlet and the elemental biological outlet that is typified in sex.

There is no mistaking the fact that a normal sex life for the average adult offers a means of regularly relieving the nervous tension and maintaining mental and physical health that is obtainable in no other way.

It is impossible to estimate the extent of the nervous afflictions that are due to basic sex causes—either in the form of virtual suppression, or in some cases to excessive or unwise indulgence of the sexual urge.

Freud mentions the sexual determinants of anxiety neurosis in men, formulating them in the following groups, every one of which has its analogy in women:

1. Fear of the intentional abstainers. This is frequently combined with symptoms of defense (obsessions, hysteria). The motives which are decisive for intentional abstinence carry along with them the fact that a number of hereditarily burdened eccentrics, etc., belong to this category.

2. Fear in men with frustrated excitement (during the engagement period, for instance), persons who out of fear for the consequences of sexual relations satisfy themselves with fondling or looking at the woman. This group

of determinants which can moreover be transferred to the other sex—engagement periods, relations with sexual forebearance—furnish the purest cases of the neurosis.

3. Fear in men who practice *coitus interruptus* (incomplete sexual relations). In "*Woman's Sexual Life*" we have observed how *coitus interruptus* injures the woman if it is practiced regardless of the woman's gratification. It becomes injurious to the man if in order to bring about the gratification in the woman he voluntarily controls the coitus by delaying the ejaculation. In this manner we can understand why it is that in couples who practice *coitus interruptus* it is usually only one of them who becomes afflicted.

Moreover, *coitus interruptus* only rarely produces in man a purely anxiety neurosis. Usually it is a mixture of the same with neurasthenia.

4. Men in fear when they undergo the physiological changes incident to middle age. There are men who show a climacterium like women, and merge into an anxiety neurosis at the time when their potency diminshes and their libido increases.

Finally, Freud adds two more cases as applicable to both sexes:

5. Neurasthenics often merge into anxiety neurosis in consequence of masturbation as soon as they refrain from this manner of sexual gratification. These persons have specially made themselves unfit to bear abstinence.

What is important for the understanding of the anxiety neurosis is the fact that any noteworthy development of the same occurs only

in men who remain potent and in non-anesthetic women. In neurasthenics, who on account of masturbation, have markedly injured their potency, anxiety neurosis as a result of abstinence occurs but rarely and limits itself usually to hypochondria and light chronic dizziness. The majority of women are really to be considered as "potent." A real impotent, that is a real anesthetic woman, is also inaccessible to anxiety neurosis, and bears strikingly well the injuries cited.

6. The last of the determinants to be mentioned seems, in the first place, really not to be of a real sexual nature. Anxiety neurosis originates in both sexes through exhaustive undertakings combined with worry, sleepless nights, sometimes from nursing the sick, for instance, and even after serious illness. In all of these, although the latter perhaps to a lesser extent, it is worry that plays an important role in the neurosis.

In this connection, Dr. Edward J. Kempf advances the following biological principles as absolute rules of the game which the individual is predestined to play in his struggle to develop virility."

a. Use of organs and their functions is necessary to prevent the atrophy of disuse and their impotence; and regulation of use is necessary to avoid eccentric development and social inferiority.

b. Social opportunity for use of functions and organs must therefore either exist or be created for the individual by the members of the group and the individual himself.

c. Fear, if not compensated for, tends to pre-

vent the use of those functions and affections which entail responsibilities that the individual dreads.

d. Autonomic cravings that can not be gratified cause uncomfortable visceral and postural tensions (neuroses) which tend to force the individual, in order to obtain relief, to strive to secure gratification. He usually becomes forced to repress the craving if the taboos and conventions of society are severely critical of it, or if his restraining obligations are impassable.

e. The conventions of society are, essentially, designed by social groups to control the affective cravings of the individual. The individual must suffer if the autonomic cravings have been conditioned through experiences to need that which happens to be tabooed by his associates, whose esteem he wishes to retain.

f. When his cravings are uncontrollable and intolerable, a psychosis (insanity) develops to give relief.

Thus the demented individual of this type is the victim of autonomic cravings which have destroyed his interest in society by overcoming and distorting the effective needs for social esteems.

The biological principles set forth above are predicated upon the proposition that the individual normally strives, consciously or unconsciously, for adjustment in his social environment—that is, he seeks on the one hand the esteem of his fellow men and thus subscribes with more or less grace to the conventions of the social group; and on the other hand, he

seeks to exercise his autonomic cravings in a socially acceptable manner.

This "socially acceptable manner" is a very elastic term, and in different social environments is variously interpreted, allowing considerable personal freedom in some, and in others is too repressive for the better interests of the individual as a biological organism. It is from such predicaments that many transparent hypocrasies and now obsolete social conventions have had their origin.

INSANITY

There is a great amount of statistical data on the comparative liability of males and females to insanity, and the consensus of the best authority is that in the past, males have been more liable to insanity than females. From Aretæus, a Greek physician of the first century, to many prominent contemporary investigators, the weight of the evidence favors this statement. Dr. Jarvis came to this conclusion many years ago after examining the statistics of asylums in America, Great Britain, Ireland, France and Belgium. It is true that there have been contrary opinions of some weight on this question, namely by Esquirol, the famous French authority, as well as Georget, Haslam and others.

Parchappe, however, put the subject upon a more accurate basis than Esquirol and his colleagues had done, when he pointed out that in order to form an accurate estimate of the sexual incidence of insanity, the actual number of admissions to asylums must be considered rather than the number of inmates at a cer-

tain time. The latter course is an unreliable one upon which to base conclusions, for the reason that the figures do not give any idea of varying rates of mortality and recovery in the two sexes.

Thurnam, in his decisive investigation, showed that the probability of recovery from insanity is greater in women than in men, the recoveries of women exceeding those of men by margins ranging from 4 to 28 per cent. He also showed that there is a still greater difference in the rate of mortality, that of men ranging from 50 to nearly 90 per cent. greater than women. In 24 asylums out of 32, which included a total of 71,800 admissions, Thurnam found a decided excess of men among the admissions. The average excess was 13.7 per cent. In the London asylums, however, there was no such excess of men in the admissions.

The same authority also observed that a larger proportion of women became insane relatively to men among the poorer classes than among those in better circumstances. He concluded that "in nearly all points of view women have an advantage over men in reference to insanity; for not only do they appear to be less liable than men to mental derangement, but when the subjects of it, the probability of their recovery is on the whole greater, and that of death considerable less. On the other hand, the probability of a relapse, or of a recurrence of the disorder, is somewhat greater in women than in men."

There are some interesting deductions to be

drawn from these findings. In the first place, the better chance of women for recovery from insanity, and the greater probability of a relapse or recurrence of the disorder, have a distinct bearing upon woman's nature. Her life, in comparison with man's, is one of cycles, She is constantly either on the upward or downard slope of a curve in her cycle of life. Man's life, on the other hand, is more on a plane.

Looking at the matter from this angle, and especially in connection with the modern systems of psycho-therapeutics, which were unknown when many of the now classical reports and summaries were written, there is a very optimistic outlook for the *individual.*

As alcoholic excess is recognized as one of the principal causes of insanity, it is most probable that this has influenced the greater number of male admissions to asylums—as men are almost everywhere the heaviest drinkers. In London, however, there is no such excess of men in admissions to institutions for the mentally deranged. This further confirms the probable cause of drunkenness as a prime factor in the general incidence of insanity, as hard drinking among women in large sections of the poorer classes is well known in that city.

Marro made extensive investigations at the Turin Asylum, and paid special attention to cases at which the age was definitely known when the first appearance of insanity manifested itself. He found, of course, that before puberty there is little insanity, and when it

does occur prior to the pubescent period, it is usually due to arrested development of some kind, such as idiocy, imbecility, moral insanity, cretinism, etc.

From puberty onward, there is a rapid rise in the incidence of mental aberration, occurring earlier in girls, and later the preponderance leaning toward the male side.

During mature life, men are more liable to insanity, but at the period of the change of life in women, the latter again show a higher rate. In old age, there is little difference in the liability between the sexes.

While alcoholic excess, followed by bodily disease and pecuniary troubles, is attributed as the principal cause for insanity in men; in women the important causative factors are love, pecuniary troubles, domestic misfortunes, religion and jealousy.

Havelock Ellis sums this matter up by stating that on the whole, "it may be said that causes acting on the brain are more common in men; moral and emotional causes are more common in women. Excesses, both intellectual and sensual, especially in alcohol, are more common causes in men."

The types of insanity in the two sexes make an interesting comparison. Mania is more common in women than in men; but melancholia is still more so. It has been observed that while mania is an insanity of the young, the uncivilized, and the savage, melancholia is an insanity of the adult and the civilized. Clauston remarks that "to get a fine type of melancholia, you must get an educated brain."

Among the educated, he remarks, there are more cases of melancholia, of monomania (paranoia), of paralysis of will power. It is remarkable that these typical examples of insanities of the educated are all more common in women than in men.

Dementia præcox, under which designation at least a quarter of the inmates of asylums are now usually grouped, is often equally common in both sexes.

The graver and more incurable forms of insanity, which prevail chiefly among those groups of the lowest mental and cultural standards, are much more frequent in men.

With respect to alcoholism as an important causative factor in insanity, Ellis remarks that inebriety, as is now beginning to be recognized, is something more than a mere taste for drink. It is in a large number of cases the sign of a deep-rooted disorder of the nervous centres. In other words, people who indulge excessively in alcoholic drinks or who crave narcotic stimulation, are largely victims of a defective nervous organization. And when they are denied access to alcoholic concoctions, they inevitably tend to find a substitute—often of a more destructive nature (as we have so often noted in our experience of the Volstead era). It is, however, not uncommon that people of this type, when they do manage successfully to renounce all narcotics, find a refuge from reality in a more or less continuous emotional spree. Thus we have the flamboyant, intolerant, and usually ignorant disciples of various brands of evangelism—religious, po-

litical, racial, nationalistic, and whatnot, who work themselves up into frenzy and hysterics in their demonstrations of what, after all, is primarily unhealthy nerves.

It is only too true that there are grievous evils and age-old injustices that should be combated by intelligent effort, and to which the application of rigorous logic is a crying need.

But mere emotional orgies never get to the bottom of anything. They perpetuate shallow thinking and inevitably do more harm than good, however high-sounding may be their platitudes and slogans.

We have observed the relative sexual aspects of insanity, in which women seem to be more favorably situated than men. This does not mean, however, that insane women are more tractable subjects than insane men. On the contrary, in fact, because of her greater suggestibility and hysterical tendencies, the demented woman is on the whole a more difficult problem to handle than the man.

Manifestations of vocal hysteria in women have been noted for over two thousand five hundred years; in fact, the word "hysteria" has a definite sexual meaning, and was so adopted by the ancient Greeks because it was thought to have its origin in disturbed conditions within the womb. "Hysteria" means the uterus or womb.

Dr. Clauston remarked that "there is ten times as much noise in the female wards as there is in the male wards." This greater obstreperousness of the female is by no means confined to any nationality or race. The same

authority also points out that in the insanity of puberty, a destructive tendency in the female seems to take the place of pugnacity in the male.

In a paper entitled "*The Sexes in Lunacy*," Dr. T. Clyde Shaw cites many illuminating facts bearing upon this subject. After remarking that women are less willing to work in asylums than men, and that they "give infinitely more trouble than men and cause much more anxiety," he continues: "The number of women in an asylum who require extra supervision and consequent deprivation of liberty far exceeds that of men. It is only epilepsy and drink that reduce men to the same condition as women. . . . Destructiveness is a very dangerous and troublesome symptom, and it must be said that it prevails to a far greater extent among women than among men. A look at the airing grounds of an asylum is as good a test of this statement as can be got. On the male side, the damage done is comparatively trifling, but on the female side the gardener is driven to despair, for broken trees, torn-up flowers and downtrodden plants proclaim the presence in its exaggerated and insane form of the spirit that animated the occupants." (And in connection with this, we must remember that insanity is much less serious in women, and that they more frequently recover than do men.)

CHAPTER V
MAN'S "CHANGE OF LIFE"

Dr. Bernard Hollander, the prominent English neurologist and psychiatrist, remarked that "Nervous symptoms are also common when men approach middle age and, like women, undergo the 'change of life'."

There is no question but that, between the ages, approximately, of forty-five and fifty-five, man enters another epoch of life, and that every side of his personality reflects in some degree the change that takes place.

In the majority of cases, these changes occur so gradually that they are hardly perceptible. Nevertheless, there are profound constitutional changes taking place, which react both on mind and body, perhaps second only to those that occur at the epoch of puberty.

It might be said that this period is one of preparation for senescence—as puberty is one of preparation for the cycle of vigorous manhood which normally follows. Senescence, however, does not necessarily mean that beginning with the sixth decade, man is doomed to a profitless and uninteresting final span of life. At least, this is not essentially so, although social-economic conditions of the present order militate against the welfare of a great majority of people who have passed their prime.

The period of a man's life after sixty, whether it happens to be long or short, offers many possibilities for rich and vital experience, in some respects surpassed by no other stage

of life. The important thing is to maintain sufficient contacts with life to keep the viewpoint fresh and receptive, and the mind clear and active.

Fresh air, sunshine and mild exercise will help the body and preserve the vitality, and even the state of mind will reflect itself in a general constitutional way. So in every sense is it necessary to keep from mental stagnation which so many men settle into at the period of life we are discussing, and the stage immediately preceding it.

With reference to this, Dr. Hollander states: "One of the chief constitutional symptoms is a tired condition, often implying an instinctive feeling that work, exertion, and effort are not always entirely worth the doing. Physiologically and psychologically, energizing by itself is no longer felt to be so necessary. The tired feeling often leads to a lowering in the desires and ideals. Pleasures that cost little and imply small exertion are preferred to pleasures of the higher sort that need some strenuousness to attain them. Bad habits begin to show their cumulative effects, and the recovery after indiscretions is less certain and slower. There is a slackening of the intellectual powers with inability to concentrate the attention and diminished energy for work. The intellectual processes are both retarded and more difficult. There is no longer the same initiative and inspiration and former concentration. In intellectual workers the imaginative power is diminished, hence it is difficult for them to originate new work. In consequence, they become

dissatisfied with their occupation and lose self-confidence."

These and other characteristics described, it will be understood, are not symptoms of senility, but of man's "change of life." It might be inferred from Dr. Hollander's statement that these symptoms are the inevitable consequences of that stage of life.

I believe it can be demonstrated, however, that these symptoms are the affects of erroneous modes of life, rather than normal characteristics. Only too often men permit themselves throughout their whole adult life to fall into slovenly mental habits. They have had closed minds from the beginning, largely because of petty educational, religious and social influences, which have prejudiced them against any ideas that do not come within the pale of the prevailing stereotyped notions which they have embraced.

Under these conditions, it is only natural that the average man at this period, when there is the beginning of a decline in his constitutional vigor, should rapidly lose what capacity he has had for tasting the fruits of an intellectual life.

The mind in these stagnating circumstances might be compared to the muscles of the body that have become weak and flabby through lack of exercise. The mental processes have long since lost their plasticity and capacity for functioning except in the most circumscribed orbit, and even here the mental powers soon feel the blighting shadows creeping over them.

PERIOD OF SEXUAL DECLINE

There is normally a decline in sexual potency and desire at the male climacterium, although by no means is it to be inferred that the powers of sex are seriously disturbed at this period. They should last for many years longer, but there is not the same sexual robustness that prevailed at the hightide of masculine vigor. This is natural, and is based on solid biological grounds. In the realm of nature generally, the male by this time has exercised his biological function as a progenitor of his kind and has made his contribution to the continuance of the race.

However, it is not usual for a man to become obsessed with worry over his diminished potency, and sexual hypochondriasis is by no means rare. It sometimes happens, too, that concomittant with the diminishing of the sexual powers, there is an increase in desire which so often results in a neurosis.

This is particularly true of the *Don Juan* who has poured his passions prolifically upon the fires of Venus' altar, and in the twilight of his sexual activity the glowing embers of past memories inflame and mock his lusts, which he lacks the potency to feed.

Lorenzo de Azertis had this thought in mind when, in his dramatic version of "*Casanova*," he makes that classical lover, in his physical decline, say to the Inn-keeper, solitious for his bill:

"I'm the Chevaliar de Seingalt, who snubbed the King of Prussia because he had a stupid face; who quarreled three days on end with

Voltaire; who had three hundred mistresses and all of them beautiful; who has felt in his old veins fire enough to stir the ghosts of all the youths of ancient Rome. Oh, my friend, my ironical friend, this body has been enveloped in such glories of passion that, did it retain a single spark, it would shine with a splendor that would blind you. Remember that, my friend, when you are tempted to impertinence."

When the *Don Juan* finds himself in the throes of impotence, the burden of his lamentation is "Oh, for a month, a week, a day of my youth!"

As the normal reproductive period of life has been passed, the climacterium for both sexes may be considered the stage of readaptation of the bodily machinery to a more modified functional activity.

The physical activities from this time on, for men used to strenuous effort, should be modified to conform to these changed constitutional conditions. This is by no means an argument for an inactive life, or for a sudden change from former physical habits when they are energizing and not harmful, but it is simply an admonition to avoid extremes.

In the realm of mental activities, the conditions are somewhat different. If a man has kept himself intellectually active, there need be no perceptible diminution in the intellectual output. As a matter of fact, the mental processes should be running at their maximum degree of efficiency. If constructive mental habits have been cultivated, intellectual work

should be performed with greater ease, with the minimum of effort; and it is visible, conscious effort, whether physical, mental or emotional, which tires, rather than activity which is performed largely by orderly subconscious processes under the guidance of the intellectual faculties.

It cannot be emphasized too strongly that variety in mental occupation, and an active interest in many things, do more than anything else to keep the mind clear and agile, and wards off the torpor so often associated with senescence.

When mental and intellectual impairment is involved at this period, it is almost invariably a reflection of physiological weakness. When this takes place, it is a great deal more difficult to restore the bodily vigor than at the flush of manhood.

For the treatment of physical and psychical disturbances accompanying the male climacterium, Dr. Hollander advocates the treatment of the nervous system. He maintains that striking success is attained by this means, and that most cases recover former health and energy in a short time. This result is brought about by strengthening the nerve centers and not by local stimulation. Electricity administered by a thoroughly competent specialist in this field has been highly beneficial in affecting a general tonic in conditions of debility and exhaustion. It tends to regenerate the nerve-force, increases vitality and strengthens the resistence against disease.

It is indeed a constructive and helpful note

which this authority strikes in summing up the situation as follows: "The patient must be made to realize that if his body has lost in elasticity it will now gain in massive strength; that if his thought-engine throbs with less violent pulsation, it will now gain in cool, orderly and harmonious vibrations, and that sound maturity can be quite as efficient and enjoyable, though not so exuberant, as youth. It is no use sighing for days that have gone; he must enjoy the glory and triumphs of manhood without regrets for the past or fears for the future."

Gertrude Atherton, the famous novelist, lists this monumental work as one of the ten books of all time she has most enjoyed.

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